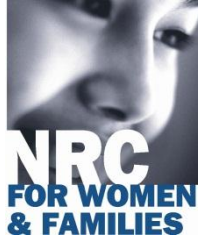


**JACOBS INSTITUTE  
OF WOMEN'S HEALTH**



September 19, 2012

To the Health Care Reform Implementation Council:

We write on behalf of three national organizations, the Jacobs Institute of Women's Health, the National Research Center for Women & Families, and the National Women's Health Network, to express our views on several of the benchmark plans that you are considering for Illinois' Essential Health Benefits. All three of our nonprofit organizations are dedicated to improving the health of women in the State of Illinois and across the country.

One issue of concern to our organizations, which is not always covered by the Blue Cross/Blue Shield Plans that Illinois is considering, is insurance coverage for the medically necessary, timely removal of an implanted device when it fails or deteriorates in the body. Lack of insurance coverage for this care can lead to delays in removal which can have terrible repercussions for the health of the patient and enormous medical costs as well. The need for coverage for care of this kind rarely gets much attention, but it holds the potential to contribute to the health of so many Illinois women and men who are living with implanted devices of many types.

Our organizations are particularly concerned with, and supportive of, coverage for the removal of breast implants when such removal is medically necessary because of leakage or other serious health problems. The U.S. Food and Drug Administration (FDA), which regulates these products, clearly states that leaking implants should be removed as soon as possible.<sup>1</sup>

Current federal law requires Medicare and virtually all types of insurance policies to cover the cost of reconstruction with breast implants after mastectomy. This coverage includes the implantation of a device on the opposite side as well, to provide balance. If those implants leak and need to be removed, the law also helps women with the expenses associated with that surgery.<sup>2</sup> All the plans that Illinois is considering abide by that law.

---

<sup>1</sup> U.S. Food and Drug Administration. Risks of Breast Implants. 6 June 2011. Accessed at <<http://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/ImplantsandProsthetics/BreastImplants/ucm064106.htm>> on September 1, 2012.

<sup>2</sup> Women's Health and Cancer Rights Act of 1998 (P.L. 105-277) 29 U.S.C. Section 1185b.

However, only about 25 percent of women with breast implants are mastectomy patients, leaving 75 percent of the women with implants without the protection of federal law requiring coverage when their implants leak and require removal.<sup>3</sup>

It is well established that breast implants do not last a lifetime, and many women will have at least one broken implant within 15 years, with the likelihood of rupture increasing over time.<sup>1</sup> Fortunately, Medicare and Medicaid will often pay for the removal of breast implants when medically necessary, such as when the implants are leaking. We want to make sure that Illinois' benchmark plan provides similar coverage, which is very important for women's health. We are pleased that the United Healthcare Choice Plus small group plan and the CIGNA Quality Health Care Plan (state employee plan), which are two of the benchmark plans under consideration, provide such coverage. Unfortunately, all the Blue Cross/Blue Shield plans that Illinois is considering specifically exclude such coverage. In our experience, excluding such coverage is penny wise and pound foolish, because medically-necessary and timely removal will reduce problems caused by leaking implants, such as granulomas that can be mistaken for breast tumors, silicone leakage throughout the breast and into the lymph nodes that can occur when a woman with a broken implant undergoes mammography, or hardening of scar tissue (called capsular contracture) that can cause chronic and debilitating breast pain. In addition to the higher cost of treating such complications instead of preventing them, excluding coverage of medically necessary removal is very harmful to women's health. (Please note that we are discussing medically necessary removal only, we are not discussing replacement of broken implants.)

It is the recognition of the cost-effectiveness of removal of leaking implants that has persuaded United Healthcare's Choice Plus small group plan, CIGNA's state employee plan, Medicare, and many other plans to cover these procedures when medically necessary. In fact, in most states Blue Cross/Blue Shield small group plans also pay for removal when medically necessary, regardless of whether the implants were originally for cosmetic reasons or mastectomy. It is very unfortunate that Blue Cross/Blue Shield has specifically excluded such coverage in Illinois and would be devastating to many women's health if Illinois were to choose a benchmark plan that does so. We oppose adopting the Illinois Blue Cross/Blue Shield plans and urge adoption of one of United Healthcare's Choice Plus small group plan or CIGNA's state employee plan as the Illinois benchmark plan.

Sincerely,

Jacobs Institute of Women's Health  
National Research Center for Women & Families  
National Women's Health Center

Founded in 1990, the Jacobs Institute of Women's Health works to improve health care for women through research, dialogue and information dissemination. Our mission is to identify and study women's health care issues involving the interaction of medical and social systems; to facilitate informed dialogue and foster awareness among consumers and providers alike; and promote problem resolution, interdisciplinary coordination and information dissemination at the regional, national and international levels. JIWH publishes the peer-reviewed multidisciplinary journal *Women's Health Issues* and is a program within the George Washington University School of Public Health and Health Services.

---

<sup>3</sup> U.S. Food and Drug Administration. FDA Update on the Safety of Silicone-Gel Filled Breast Implants. Accessed at <<http://www.fda.gov/downloads/MedicalDevices/ProductsandMedicalProcedures/ImplantsandProsthetics/BreastImplants/UCM260139.pdf>> on September 1, 2012.

The National Research Center for Women & Families is dedicated to improving the health of adults and children by using research-based information to encourage new, more effective programs, policies and medical treatments. Founded in 1999, they work at the national, state and local level, assisting individuals, policymakers, agencies and other organizations in order to ensure the best possible health care and reduce dangerous exposures in our homes and communities. Their primary program is their Cancer Prevention and Treatment Fund, although they work on an inclusive range of health and health policy issues.

The National Women's Health Network was founded in 1975 to give women a greater voice within the healthcare system. Their mission is to improve the health of all women by influencing policy and supporting informed consumer decision-making. The NWHN aspires to a health care system that is guided by social justice and reflects the needs of diverse women. NWHN is supported by a membership, made up of individuals and organizations nationwide. We do not accept financial support from pharmaceutical companies, tobacco companies or medical device manufacturers.